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Bib Data Sheet

CONFIRMATION NO. 7324

<b>SERIAL NUMBER</b> 10/682,184	<b>FILING OR 371(c) DATE</b> 10/09/2003 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 106586-170
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**APPLICANTS**

Lee A. Core, Cambridge, MA;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/417,705 10/10/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***  
 01/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>cm</u> Initials _____	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 12	<b>INDEPENDENT CLAIMS</b> 4
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**ADDRESS**

23483

**TITLE**

Hemostasis valve

<b>FILING FEE RECEIVED</b> 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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